

Procedure Information Sheet – Ankle Arthroscopy and Ligament Reconstruction

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No. :	

1. Introduction

- 1.1. The ligaments of ankle consist of medial ligament and lateral ligament. The ligament complex provide stability to the ankle in motion.
- 1.2. You may need ankle arthroscopy if you have debris in your ankle from torn cartilage or from a bone chip. Also, if there is ligament damage from a severely sprained ankle, a bone surgeon may choose to do an arthroscopy to evaluate the extent of damage and possibly to repair it.
- 1.3. This surgery is a common procedure that can restore the ankle stability to allow patient with such injury to return to normal.

2. Procedural Preparation

- 2.1. Tests may be ordered include X-Ray, ultrasonography or Magnetic Resonance Imaging (MRI) of ankle, blood tests, Chest X-Ray and Electrocardiogram (ECG).
- 2.2. The reason of operation, procedure and possible complications will be explained by the surgeon and consent form will be signed before operation.
- 2.3. Pre-operative anesthetic assessment will be performed. The anesthetic management and its possible risks will be explained by the anesthetist with consent for anesthesia signed.
- 2.4. Inform doctor for any drug allergy, regular medications or other medical conditions.
- 2.5. Do not eat or drink for 6 to 8 hours before operation if under general anesthesia.
- 2.6. Check with your surgeon regarding prescription medications and herbal medications that you may be taking.
- 2.7. Do not take blood-thinning agents for a few days prior to the surgery.
- 2.8. Prophylaxis antibiotics may be prescribed.

3. Procedure

- 3.1. The operation will be performed under general anesthesia or spinal anesthesia.
- 3.2. The surgeon will make an incision either at the front or back of your ankle, depending on your condition. They may put in an arthroscope which can determine the level of damage in the area. Stretched or torn ligaments will be repaired or reconstructed as needed.
- 3.3. After the operation, the ankle may be immobilized by slab.

4. Recovery Phase

- 4.1. Elevation of the operated leg above heart level is encouraged to reduce swelling and pain.
- 4.2. The wound should be kept clean and dry while the incisions are healing.
- 4.3. From Day 0 to Day 14, cryotherapy and non-weight bearing crutch walking will be arranged according to physiotherapist.
- 4.4. From Day 14 to week 6, the slab will be removed if any slab is applied. Full weight bearing walking and balance training will be started.
- 4.5. Avoid high-stress activities for a number of weeks.

5. Possible Risks and Complications

- 5.1. There are complications that relate to surgery in general. These include the risks associated with anesthesia, infection, damage to nerves and blood vessels, and bleeding or blood clots.
- 5.2. This operation is generally very effective and is rarely associated with major complications like massive bleeding. Some people unfortunately do suffer a re-rupture of their ligaments, and require further treatment.

6. Remark

- 6.1. The above-mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or individual differently. Please contact your physician for further enquiry.

Hosp No. : HKID No.:
Case No. :
Name :
DOB : M / F
Adm Date :
Contact No. :

Procedure Information Sheet – Ankle Arthroscopy and Ligament Reconstruction

7. References

- 7.1. eMedicineHealth. Ankle Arthroscopy.
- 7.2. Fortius Clinic. Ankle Ligament Reconstruction Surgery.
- 7.3. Thordarson, D. B. (Ed.). (2013). Foot and ankle. Philadelphia, Pa.: Kluwer/Lippincott Williams et Wilkins.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____

